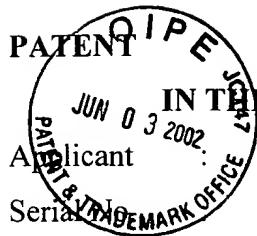


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JUN 11 2002

TECH CENTER 1600/2900



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant Alan R. Hirsch

Serial No. 09/211,507

Filing Date : December 14, 1998

For : USE OF ODORANTS TO ALTER BLOOD FLOW TO THE VAGINA

Group Art Unit: 1651

Examiner : C. Tate

Docket No. : INS-31061

Confirmation No.: 9827

**CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10**

I hereby certify that, on the date shown below, this correspondence is being:

**Mailing**

- ☒ deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231

**37 CFR 1.8(a)**

**37 CFR 1.10**

- ☐ with sufficient postage as first class mail ☒ As "Express Mail Post Office to Addressee" Mailing Label No. EL609566749US

**Transmission**

- ☐ transmitted by facsimile to Fax No. \_\_\_\_\_ addressed to Examiner \_\_\_\_\_ at the Patent and Trademark Office.

Date: June 3, 2002

Kristine M. Stedthoff

Assistant Commissioner for Patents  
Washington, D.C. 20231

**TRANSMITTAL**

- Transmitted herewith is:  
Response (with cited references)  
Replacement sheets for Claims  
Redline version of Claims  
Check in the amount of \$200.00 (fee for Extension of Time)  
Return Postcard

**STATUS**

- Applicant is a small entity.

06/07/2002 ZJUHR1 00000074 09211507

01 FC:216

200.00 OP

767339

**EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.
- ☐ Applicant believes that no extension of term is required. However, if an extension of time is required, please consider this a petition therefor.
- ☒ Applicant petitions for an extension of time under 37 C.F.R. ' 1.136 for the total number of months checked below [fees: 37 C.F.R. ' 1.17(a)(1)-(4)] :

Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/> one month	\$ 110.00	\$ 55.00
<input checked="" type="checkbox"/> two months	\$ 400.00	\$ <b>200.00</b>
<input type="checkbox"/> three months	\$ 920.00	\$ 460.00
<input type="checkbox"/> four months	\$ 1,440.00	\$ 720.00
		Fee: <b><u>\$200.00</u></b>

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Claims Remaining After Amendment		Highest No. Previously Paid For		Rate (Small Entity)	Additional Fee or	Rate (Large Entity)	Additional Fee
Total	Minus		=	_____ x 9= \$	\$	x 18	\$
Independent	Minus		=	_____ x 39= \$	\$	x 84	\$

**FIRST PRESENTATION OF MULTIPLE DEP CLAIM**

TOTAL  
ADDIT. Fee \$

or TOTAL  
ADDIT. Fee \$ \_\_\_\_\_

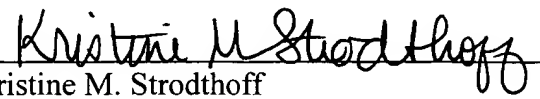
c. ☒ No additional fee for claims is required.

d. ☐ Total additional fee for claims required \$ \_\_\_\_\_

**FEE DEFICIENCY**

5. If any additional extension and/or fee is required, charge Account No. 23-2053.  
If any additional fee for claims is required, charge Account No. 23-2053.

Date: June 3, 2002

  
Kristine M. Strodthoff  
Reg. No. 34,259

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